Case 17-10944-TPA Doc 12 Filed 10/02/17 Entered 10/02/17 14:14:16 Desc Main

		Docum	CHL I ddC I OI 37	
Fill in this info	rmation to identify your	case:		
Debtor 1	Michael L Campb	ell		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		WESTERN DISTRICT	OF PENNSYLVANIA	
Case number	17-10944			
(if known)				☐ Check if this is an amended filing

#### Official Form 106Sum

#### Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Par	t 1: Summarize Your Assets		
		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	20,441.25
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	43,378.05
	1c. Copy line 63, Total of all property on Schedule A/B	\$	63,819.30
Par	t 2: Summarize Your Liabilities		
			abilities It you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	105,142.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	11,000.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	143,218.24
	Your total liabilities	\$	259,360.24
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	5,099.24
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	4,103.24
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other co	hadulaa
		i other sc	nedules.
7.	Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	personal	, family, or

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

page 1 of 2

the court with your other schedules.

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From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

8,320.85 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on <i>Schedule E/F</i> , copy the following:	Total	claim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	11,000.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	11,000.00

	Case	e 17-10944-TI	PA Doc 12		iled 10/02/ cument	17 Entere		2/17 14	:14:16	De	sc Main
Fill	in this info	rmation to identify	your case and th			T ddc 5 or	J-				
Deb	otor 1	Michael L Ca	ampbell Middle	Name		Last Name					
	otor 2 use, if filing)	First Name	Middle	Name		Last Name					
Unit	ted States B	ankruptcy Court for	the: WESTERN	DISTE	RICT OF PENN	SYLVANIA					
Cas	e number	17-10944				-					Check if this is an amended filing
SC n eachink	chedu ch category, it fits best.	Drm 106A/B  le A/B: Pr  separately list and de Be as complete and a pre space is needed, a setion.	roperty escribe items. List a	e. If two	o married people	are filing together	r, both are	equally resp	onsible for su	upply	ing correct
	No. Go to Pa	have any legal or equart 2. is the property?	unable interest in a	ny resi	derice, building,	iand, or similar pro	орену:				
1.1	400 Ctom	shawah Awanus		Wha	at is the property	? Check all that apply					
		<b>baugh Avenue</b> s, if available, or other desc	cription		Condominium	i-unit building		Do not deduct secured claims or e the amount of any secured claims Creditors Who Have Claims Secured			ms on Schedule D:
	Sharon City	PA State	<b>16146-0000</b> ZIP Code			or mobile home		Current va entire prop			rrent value of the rtion you own? \$20,441.25
				Who	has an interest	in the property? C	Check one	(such as fo	ee simple, ten e), if known.		ownership interest by the entireties, or
	Mercer				Debtor 2 only						
	County				At least one of er information yo	the debtors and an		(see in:	c if this is con structions) cal	nmun	ity property
				Rea	perty identification al Property r Market Valu	on number: ne based on Ta	ax Asses:	sment (11	,850 x 3.45	5)	

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....=>

\$20,441.25

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

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Case number (if known) 17-10944 Debtor 1 Michael L Campbell 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles Yes Do not deduct secured claims or exemptions. Put Jeep Who has an interest in the property? Check one Make: the amount of any secured claims on Schedule D: **Cherokee Sport** Model: Debtor 1 only Creditors Who Have Claims Secured by Property. Year: 2016 Debtor 2 only Current value of the Current value of the Approximate mileage: 24.000 entire property? portion you own? Debtor 1 and Debtor 2 only Other information: At least one of the debtors and another \$19.800.00 \$9,900.00 ☐ Check if this is community property (see instructions) Do not deduct secured claims or exemptions. Put Jeep 3.2 Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: **Compass Altitude** Model: ☐ Debtor 1 only Creditors Who Have Claims Secured by Property. Year: 2014 Debtor 2 only Current value of the Current value of the 30,000 Approximate mileage: portion you own? Debtor 1 and Debtor 2 only entire property? Other information: At least one of the debtors and another \$13,475.00 \$6,737.50 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ☐ No Yes Make: **Polaris Ranger** Who has an interest in the property? Check one Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: 570 Side by Side ■ Debtor 1 only Creditors Who Have Claims Secured by Property. Model: 2016 Debtor 2 only Year: Current value of the Current value of the entire property? portion you own? Debtor 1 and Debtor 2 only Other information: At least one of the debtors and another \$9,999.00 \$9,999.00 ☐ Check if this is community property (see instructions) 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$26,636,50 pages you have attached for Part 2. Write that number here.....=> Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware ☐ No Yes. Describe..... Various Household Goods and Furnishings \$2,225.00 **Summary Available Upon Request** 7. Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

☐ No

Case 17-10944-TPA Doc 12 Filed 10/02/17 Entered 10/02/17 14:14:16 Desc Main Document Page 5 of 54 Case number (if known) 17-10944 Debtor 1 Michael L Campbell Yes. Describe..... Electronics \$1,550.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories ☐ No ■ Yes. Describe..... Clothes \$40.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver □ No Yes. Describe..... \$40.00 Jewelry 13. Non-farm animals Examples: Dogs, cats, birds, horses No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$3,855.00 for Part 3. Write that number here ..... Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition □ No Yes. Cash \$20.00 Case 17-10944-TPA Doc 12 Filed 10/02/17 Entered 10/02/17 14:14:16 Desc Mair Document Page 6 of 54

Case number (if known) 17-10944 Debtor 1 Michael L Campbell 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: ■ Yes..... PNC Bank (5459) \$1.117.87 Checking Checking Omega Federal Credit Union (578) \$166.14 17 2 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts □ No Institution or issuer name: ■ Yes..... 18.0290 Shares of UPS Stock \$2,016.18 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No Yes. List each account separately. Type of account: Institution name: 401(k) **Prudential Retirement** \$7,263.36 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No Institution name or individual: ☐ Yes. ..... 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

Official Form 106A/B Schedule A/B: Property page 4

☐ Yes. Give specific information about them...

Filed 10/02/17 Case 17-10944-TPA Doc 12 Entered 10/02/17 14:14:16 Document Page 7 of 54 Case number (if known) 17-10944 Debtor 1 Michael L Campbell 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ■ No ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you □ No Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 2017 Tax Refund \$2,303,00 **Federal** 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information... 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance □ No Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: **Term Life Insurance Policy** \$0.00 **Through Employer** 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No

Official Form 106A/B Schedule A/B: Property page 5

35. Any financial assets you did not already list

☐ Yes. Describe each claim.......

■ No

Desc Main Case 17-10944-TPA Doc 12 Filed 10/02/17 Entered 10/02/17 14:14:16 Document Page 8 of 54 Case number (if known) 17-10944 Debtor 1 Michael L Campbell ☐ Yes. Give specific information... 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$12,886.55 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above Part 7: 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ■ No ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here ..... \$0.00 Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 ..... \$20,441.25 Part 2: Total vehicles, line 5 \$26,636,50 Part 3: Total personal and household items, line 15 57. \$3,855.00 58. Part 4: Total financial assets, line 36 \$12,886.55 59. Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00

\$0.00

Copy personal property total

\$43,378.05

63. Total of all property on Schedule A/B. Add line 55 + line 62

Total personal property. Add lines 56 through 61...

Part 7: Total other property not listed, line 54

61.

\$63,819.30

\$43,378.05

Official Form 106A/B Schedule A/B: Property page 6

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Fill in this info	rmation to identify your	case:		
Debtor 1	Michael L Campb	ell		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		WESTERN DISTRICT O	DF PENNSYLVANIA	
Case number	17-10944			
(if known)				☐ Check if this is an amended filing

#### Official Form 106C

### Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt
---

١.	which set of exemptions are you claiming	: Check one only, eve	n II yo	our spouse is tiling with you.						
	☐ You are claiming state and federal nonban	kruptcy exemptions.	11 U.S	S.C. § 522(b)(3)						
	■ You are claiming federal exemptions. 11 to	J.S.C. § 522(b)(2)								
2.	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.									
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the Amor		ount of the exemption you claim	Specific laws that allow exemption					
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.						
	422 Stambaugh Avenue Sharon, PA 16146 Mercer County	<b>\$20,441.25</b>		\$2,566.25	11 U.S.C. § 522(d)(5)					
	Real Property Fair Market Value based on Tax Assessment (11,850 x 3.45) Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit						
	2016 Jeep Cherokee Sport 24,000 miles	\$9,900.00		\$0.00	11 U.S.C. § 522(d)(2)					
	Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit						
	2014 Jeep Compass Altitude 30,000 miles	\$6,737.50		\$0.00	11 U.S.C. § 522(d)(5)					
	Line from Schedule A/B: 3.2			100% of fair market value, up to any applicable statutory limit						
	2016 Polaris Ranger 570 Side by Side Line from Schedule A/B: 4.1	\$9,999.00		\$0.00	11 U.S.C. § 522(d)(5)					
	Line Hom Schedule AVB. 4.1			100% of fair market value, up to any applicable statutory limit						
	Various Household Goods and Furnishings	\$2,225.00		\$2,225.00	11 U.S.C. § 522(d)(3)					
	Summary Available Upon Request Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit						

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Debtor 1 Michael L Campbell Campbell 17-10944

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own  Copy the value from Schedule A/B	Amount of the exemption you claim  Check only one box for each exemption	Specific laws that allow exemption
Electronics Line from Schedule A/B: 7.1	\$1,550.00	\$1,550.0  100% of fair market value, up any applicable statutory limit	<del></del>
Clothes Line from Schedule A/B: 11.1	\$40.00	\$40.0  100% of fair market value, up any applicable statutory limit	<u> </u>
Jewelry Line from Schedule A/B: 12.1	\$40.00	\$40.0  100% of fair market value, up any applicable statutory limit	<u>· · · · · · · · · · · · · · · · · · · </u>
Cash Line from Schedule A/B: 16.1	\$20.00	\$20.0  100% of fair market value, up any applicable statutory limit	<del></del>
Checking: PNC Bank (5459) Line from Schedule A/B: 17.1	\$1,117.87	\$1,117.8  100% of fair market value, up any applicable statutory limit	<del></del>
Checking: Omega Federal Credit Union (578) Line from <i>Schedule A/B</i> : 17.2	\$166.14	\$166.1  100% of fair market value, up any applicable statutory limit	<del></del>
18.0290 Shares of UPS Stock Line from Schedule A/B: 18.1	\$2,016.18	\$2,016.1  100% of fair market value, up any applicable statutory limit	
401(k): Prudential Retirement Line from Schedule A/B: 21.1	\$7,263.36	\$7,263.3  100% of fair market value, up any applicable statutory limit	<del></del>
Federal: 2017 Tax Refund Line from Schedule A/B: 28.1	\$2,303.00	\$2,303.0  100% of fair market value, up any applicable statutory limit	
Term Life Insurance Policy Through Employer Line from <i>Schedule A/B</i> : <b>31.1</b>	\$0.00	\$0.0  100% of fair market value, up any applicable statutory limit	<del></del>
3. Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every  ■ No □ Yes. Did you acquire the property cover □ No □ Yes	3 years after that for ca	ses filed on or after the date of adjus	,

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	Document Pa	ade II o	<u> 154                                   </u>		
Fill in this information to identify you	ır case:				
Debtor 1 Michael L Camp	phell				
First Name		st Name			
Debtor 2					
(Spouse if, filing) First Name	Middle Name Las	st Name			
United States Bankruptcy Court for the	: WESTERN DISTRICT OF PENNSY	/LVANIA			
Case number 17-10944					
(if known)				☐ Check	if this is an
				amend	ed filing
O#:-:-! F 400D					
Official Form 106D					
Schedule D: Creditors	s Who Have Claims Se	cured I	oy Propert	y	12/15
	If two married people are filing together, bo out, number the entries, and attach it to thi				
1. Do any creditors have claims secured b	v vour property?				
<u> </u>	his form to the court with your other sche	edules. You	have nothing else to	o report on this form	
Yes. Fill in all of the information	•	- Jan 100 1	Houring Gloc I	o . 5port on this form.	
	below.				
Part 1: List All Secured Claims			Column A	Column B	Column C
	more than one secured claim, list the creditor				
much as possible, list the claims in alphabeti	s a particular claim, list the other creditors in Pocal order according to the creditor's name.	art 2. As	Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
Bassaman Custam			value of collateral.	claim	If any
2.1 Bessemer System Federal Credit Union	Describe the property that secures the cl	laim:	\$34,516.00	\$19,800.00	\$14,716.00
Creditor's Name	2016 Jeep Cherokee Sport 24,00		<u> </u>		
	miles				
106 Woodfield Drive	As of the date you file, the claim is: Check	k all that			
Greenville, PA 16125	apply.				
Number, Street, City, State & Zip Code	☐ Contingent☐ Unliquidated				
Number, direct, dity, diate a zip code	☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
■ Debtor 1 only	☐ An agreement you made (such as mortg	gage or secure	d		
Debtor 2 only	car loan)				
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic	ic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this claim relates to a	Other (including a right to offset)	to Loan			
community debt					
Date debt was incurred 02/16	Last 4 digits of account number	9802			
Huntington National			\$16,841.00	\$13,475.00	\$3,366.00
Creditor's Name	Describe the property that secures the cl		<b>Φ10,041.00</b>	\$13,475.00	<del>\$3,300.00</del>
Creditor's Name	2014 Jeep Compass Altitude 30 miles	,000			
Attn: Bankruptcy					
Po Box 340996	As of the date you file, the claim is: Check apply.	k all that			
Columbus, OH 43234	☐ Contingent				
Number, Street, City, State & Zip Code	☐ Unliquidated				
	☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only	An agreement you made (such as mortg car loan)	jage or secure	d		
Debtor 2 only					
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic	c's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit	to Loon			
☐ Check if this claim relates to a	Other (including a right to offset) Aut	to Loan			

community debt

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Debtor 1 Michael L Campbell		Case number (if know)	17-10944	
First Name Middle N	lame Last Name			
Date debt was incurred	Last 4 digits of account number	9535		
2.3 PNC Bank	Describe the property that secures the cla	im: \$35,750.00	\$40,882.50	\$0.00
Creditor's Name	422 Stambaugh Avenue Sharon, 16146 Mercer County Real Property	PA		
Attn: Bankruptcy	Fair Market Value based on Tax			
249 5th Avenue	Assessment (11,850 x 3.45) As of the date you file, the claim is: Check a	II de an		
Suite 30	apply.	III that		
Pittsburgh, PA 15222	Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
Who owes the debt? Check one.	☐ Disputed  Nature of lien. Check all that apply.			
■ Debtor 1 only	☐ An agreement you made (such as mortga	ge or secured		
Debtor 2 only	car loan)			
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic!	s lien)		
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)	gage		
Date debt was incurred 04/14	Last 4 digits of account number	0993		
Syncb / Polaris Consumer	Describe the property that secures the cla	im: \$18,035.00	\$9,999.00	\$8,036.00
Creditor's Name	2016 Polaris Ranger 570 Side by Side			
Attn: Bankruptcy	As of the date you file, the claim is: Check a	II de et		
Po Box 965060	apply.	iii that		
Orlando, FL 32896	☐ Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	☐ An agreement you made (such as mortga	ge or secured		
Debtor 2 only	car loan)			
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic'	s lien)		
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)	allment Loan		
Date debt was incurred 07/16	Last 4 digits of account number	7480		
Add the dollar value of your entries in C	Column A on this page. Write that number he	re: \$105,142	.00	
If this is the last page of your form, add		\$105,142		
Write that number here:		ψ.00,1 <b>-1</b>		

#### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

C	ase 17-10944-1PA D00	Docume Docume		eu 10/02/17 14 f 5/1	.14.16 Des	sc main	
Fill in this	information to identify your case:	Docume	TIL FAUE 13 0	1 54			
Debtor 1	Michael L Campbell						
DCDIOI 1	First Name	Middle Name	Last Name				
Debtor 2		ACTO N					
(Spouse if, filin	ng) First Name	Middle Name	Last Name				
United Stat	tes Bankruptcy Court for the: WES	TERN DISTRICT C	OF PENNSYLVANIA				
Case numb	ber 17-10944						
(if known)					☐ Check	if this is an	I
					ameno	ded filing	
Official I	Form 106E/F						
	ıle E/F: Creditors Who I	lave Unsecu	ıred Claims			12/15	j
Schedule G: Schedule D: eft. Attach tl name and ca	ry contracts or unexpired leases that co Executory Contracts and Unexpired Le Creditors Who Have Claims Secured by he Continuation Page to this page. If yo ase number (if known). List All of Your PRIORITY Unsecure	ases (Official Form 1 Property. If more sp u have no informatio	06G). Do not include any o pace is needed, copy the F	creditors with partially s Part you need, fill it out, i	ecured claims that a number the entries i	are listed in in the boxes	on the
	creditors have priority unsecured claim						
☐ No. 0	Go to Part 2.						
Yes.							
identify v possible Part 1. I	of your priority unsecured claims. If a crewhat type of claim it is. If a claim has both per list the claims in alphabetical order accord from than one creditor holds a particular explanation of each type of claim, see the	oriority and nonpriority ding to the creditor's n claim, list the other cre	amounts, list that claim her name. If you have more than editors in Part 3.	e and show both priority a two priority unsecured cla	nd nonpriority amour	nts. As much a	as e of
2.1 <b>Int</b>	ternal Revenue Service	Last 4 digits of	f account number	\$11,000.00	\$11,000.00		\$0.00
	ority Creditor's Name solvency Unit	When was the	debt incurred?			_	
	D Box 628	When was the					
Pit	ttsburgh, PA 15230 mber Street City State Zlp Code			I Hala e I			
	ncurred the debt? Check one.	<u> </u>	you file, the claim is: Chec	ck all that apply			
_	btor 1 only	☐ Contingent☐ Unliquidated					
_	btor 2 only	_ '	ı				
_	•	☐ Disputed	ITY unsecured claim:				
_	btor 1 and Debtor 2 only	<u>-</u> :	pport obligations				
	least one of the debtors and another	_	0				
	eck if this claim is for a community deb claim subject to offset?		ertain other debts you owe teath or personal injury while	•			
■ No	<u>-</u>	Other. Speci		you were intoxicated			
☐ Yes		□ Other. Speci	Earned Income			-	
Dort 2	List All of Varir NONDRIODITY Line	sourced Claims					
	List All of Your NONPRIORITY Uns creditors have nonpriority unsecured c						
	You have nothing to report in this part. Sub		urt with your other schedule	ie.			
Yes.		The time form to the CO	art with your other sometime	<b>.</b> .			
unsecur	of your nonpriority unsecured claims in red claim, list the creditor separately for eac e creditor holds a particular claim, list the o	ch claim. For each clai	m listed, identify what type of	of claim it is. Do not list cla	aims already included	l in Part 1. If n	

Total claim

Part 2.

Case 17-10944-TPA Doc 12 Filed 10/02/17 Entered 10/02/17 14:14:16 Desc Main Document Page 14 of 54 Debtor 1 Michael L Campbell 17-10944 Case number (if know) 4.1 Last 4 digits of account number 7631 \$4,217.00 Nonpriority Creditor's Name Correspondence When was the debt incurred? 06/16 Po Box 981540 El Paso, TX 79998 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts Credit card purchases for gasoline, auto ☐ Yes Other. Specify maintenance and service \$3,921.00 4.2 **Bank Of America** Last 4 digits of account number 7283 Nonpriority Creditor's Name Nc4-105-03-14 When was the debt incurred? 12/05 Po Box 26012 Greensboro, NC 27410 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts Credit card purchases for clothing, ■ Other Specify groceries, and personal expenses ☐ Yes 4.3 **Capital One** Last 4 digits of account number \$6,061.00 7776 Nonpriority Creditor's Name Attn: Bankruptcy When was the debt incurred? 09/07 Po Box 30253 Salt Lake City, UT 84130 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only □ Contingent Debtor 2 only ■ Unliquidated

Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts Credit card purchases for household ☐ Yes Other. Specify supplies

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Number Street City State ZIp Code

Who incurred the debt? Check one.

Debtor 1 only
Debtor 2 only
Debtor 1 and Debtor 2 only
At least one of the debtors and another
Check if this claim is for a community debt
Is the claim subject to offset?

No
Debtor 2 only
Disputed
Type of NONPRIORITY unsecured claim:
Student loans
Debtor 1 and Student loans
Debtor 2 only
Disputed
Type of NONPRIORITY unsecured claim:
Disputed
Disputed
Type of NONPRIORITY unsecured claim:
Debtor 1 and Debtor 2 only
Debtor 2 only
Disputed
Type of NONPRIORITY unsecured claim:
Debtor 1 only
Debtor 2 only
Disputed
Type of NONPRIORITY unsecured claim:
Debtor 1 only
Debtor 2 only
Disputed
Type of NONPRIORITY unsecured claim:
Debtor 1 only
Debtor 2 only
Debtor 2 only
Disputed
Type of NONPRIORITY unsecured claim:
Debtor 1 only
Debtor 2 only
Disputed
Type of NONPRIORITY unsecured claim:
Debtor 1 only
Debtor 2 only
Disputed
Type of NONPRIORITY unsecured claim:
Debtor 1 only
Debtor 2 only
Debtor 3 only
Debtor 4 only
Debtor 4 only
Debtor 5 only
Debtor 6 only
Debtor 6 only
Debtor 6 only
Debtor 7 only
Debtor 7 only
Debtor 9 only
Debtor 9

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■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Debt owed for Judgment Received ☐ Yes

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Debto	r 1 Michael L Campbell		Document	- raye 1	.7 of 54 Case number (if know)	17-10944	
4.1	First National Bank Of Pa		Last 4 digits of acco	ount number	1110		\$5,898.00
	Nonpriority Creditor's Name  1 Fnb Boulevard		When was the debt i	incurred?	11/10		

0	First National Bank Of Pa	Last 4 digits of account number	1110	\$5,898.00
	Nonpriority Creditor's Name  1 Fnb Boulevard	When was the debt incurred?	11/10	
	Hermitage, PA 16148			
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	■ Other. Specify and/or appl	purchases for electronics iances	
4.1 1	Kohls / Capital One	Last 4 digits of account number	3818	\$221.00
	Nonpriority Creditor's Name Kohls Credit Po Box 3043	When was the debt incurred?	07/17	
	Milwaukee, WI 53201  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Credit card catalog item	purchases for clothing and	
1.1	Lending Club Corporation	Last 4 digits of account number	2250	\$28,567.00
	Nonpriority Creditor's Name 71 Stevenson Street Suite 300	When was the debt incurred?	4/04/16	
	San Francisco, CA 94105  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐Yes	■ Other. Specify <b>Credit card groceries</b> , a	purchases for clothing, and personal expenses	

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1 Michael L Campbell Case number (if know) 17-10944

Wilchael L Campbell		(ii know) 17-10944	
Onemain Financial	Last 4 digits of account number	6162	\$14,105.00
Nonpriority Creditor's Name Po Box 1010 Evansville, IN 47706	When was the debt incurred?	08/16	
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
□Yes		purchases for personal items, supplies and necessary	
Synchrony Bank / Care Credit	Last 4 digits of account number	6718	\$899.00
Nonpriority Creditor's Name	_		
Attn: Bankruptcy Po Box 965060 Orlando, FL 32896	When was the debt incurred?	08/09	
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
□ Yes	■ Other. Specify	purchases for medical	
Synchrony Bank / Gap	Last 4 digits of account number	3862	\$5,861.00
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965060	When was the debt incurred?	05/16	
Orlando, FL 32896  Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the dam	S. Oncok all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	Credit card catalog item	purchases for clothing and ms	

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Debtor	1 Michael L Campbell		Case number (if know)	17-10944					
4.1	Synchrony Bank / Lowes	Last 4 digits of account number	4414		\$3,868.00				
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965060	When was the debt incurred?	04/07						
	Orlando, FL 32896  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply						
	■ Debtor 1 only	☐ Contingent							
	Debtor 2 only	☐ Unliquidated							
	☐ Debtor 1 and Debtor 2 only	Disputed							
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:						
	$\square$ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sep	aration agreement or divorc	e that you did not					
	Is the claim subject to offset?	report as priority claims	-	·					
	■ No	Debts to pension or profit-shari	ng plans, and other similar o	debts					
	☐ Yes	■ Other. Specify supplies	d purchases for hous	sehold 					
4.1	Synchrony Bank / Sams Club	Last 4 digits of account number	9896		\$7,906.00				
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965060	When was the debt incurred?	05/08						
	Orlando, FL 32896  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply						
	■ Debtor 1 only	☐ Contingent							
	Debtor 2 only	☐ Unliquidated							
	Debtor 1 and Debtor 2 only	☐ Disputed							
	☐ At least one of the debtors and another	_ '							
	☐ Check if this claim is for a community	☐ Student loans	☐ Student loans						
	debt Is the claim subject to offset?	Obligations arising out of a sep report as priority claims	Obligations arising out of a separation agreement or divorce that you did not report as priority claims						
	■ No	Debts to pension or profit-shari	ng plans, and other similar o	debts					
	☐ Yes	Other. Specify Credit care groceries	d purchases for gaso and personal items	oline,					
Dord O	List Others to De Notified About a D	abi Thai Vara Almanda I latad							
is tryi have i	List Others to Be Notified About a Double page only if you have others to be notified and to collect from you for a debt you owe to some than one creditor for any of the debts the dot for any debts in Parts 1 or 2, do not fill out	about your bankruptcy, for a debt that someone else, list the original creditor i at you listed in Parts 1 or 2, list the add	n Parts 1 or 2, then list the	collection agency here. S	Similarly, if you				
Intern	nd Address al Revenue Service alized Insolvency Operations		ulist the original creditor? Part 1: Creditors with Pric Part 2: Creditors with Nor						
-	ox 7346	•	→ Fait 2. Creditors with Nor	ipriority orisecured Claims					
Philac	lelphia, PA 19101	Last 4 digits of account number							
Intern Willia 1000 I Room			u list the original creditor?  Part 1: Creditors with Pric  Part 2: Creditors with Nor	•					
Pittsb	urgh, PA 15222	Last 4 digits of account number							

Part 4: Add the Amounts for Each Type of Unsecured Claim

<sup>6.</sup> Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

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Debtor 1 Michael L Campbell

17-10944

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total				
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 11,000.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 11,000.00
				Total Claim
	6f.	Student loans	6f.	\$ 0.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 143,218.24
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 143,218.24

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		Bodanie	11000 22 01 0 1	
Fill in this info	ormation to identify your	case:		
Debtor 1	Michael L Campb	ell		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court for the:	WESTERN DISTRICT C	OF PENNSYLVANIA	
Case number	17-10944			
(if known)				

#### Official Form 106G

#### **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or	company with	whom you have th , Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3	Ony		Oldio	211 0000	
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>
2.4	,				
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.5					
	Name				_
	Number	Street			<u> </u>
	City		State	ZIP Code	<u> </u>

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		Document	Page 22 o	f 54	
Fill in this i	information to identify your	case:			
Debtor 1	Michael L Campb				
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, filing	g) First Name	Middle Name	Last Name		
United State	es Bankruptcy Court for the:	WESTERN DISTRICT OF	PENNSYLVANIA		
Case numb	per 17-10944				☐ Check if this is an
044 1 1					amended filing
	Form 106H				
Schea	ule H: Your Cod	eptors			12/15
people are fill it out, an	filing together, both are equ	ally responsible for supplyi boxes on the left. Attach th . Answer every question.	ng correct informati se Additional Page to	on. If more space is r this page. On the to	ate as possible. If two married needed, copy the Additional Page, p of any Additional Pages, write
′	ou navo uny ocuobiorer (iii)	you are ming a joint oace, as	not not owner opouco	ao a coucostor.	
■ No					
☐ Yes					
	nin the last 8 years, have you a, California, Idaho, Louisiana,				ty states and territories include
`	Go to line 3. Did your spouse, former spou	use, or legal equivalent live w	ith you at the time?		
in line : Form 1	2 again as a codebtor only i	f that person is a guarantor	or cosigner. Make s	sure you have listed t	g with you. List the person shown he creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor lame, Number, Street, City, State and Zl	P Code		Column 2: The cre Check all schedule	editor to whom you owe the debt es that apply:
3.1				☐ Schedule D, lin	e
	Name			☐ Schedule E/F,	
				☐ Schedule G, lin	ne
	Number Street City	State	ZIP Code	_	
3.2				☐ Schedule D, lin	e e
	Name			☐ Schedule E/F,	line
				☐ Schedule G, lin	ne
N	Number Street			=	

State

City

ZIP Code

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Fill	in this information to	o identify your ca	ase:								
Del	btor 1	Michael L Ca	ampbell			_					
	btor 2 buse, if filing)					_					
Uni	ited States Bankrup	tcy Court for the	: WESTERN DISTRIC	T OF PENNSYLVAN	IA	_					
l		10944		_			Check	if this is:			
(If kr	nown)							amended	•		
_										g postpetition ollowing date:	
<u>O</u>	fficial Form	<u> 1061</u>					MM	1 / DD/ Y	YYY		
S	chedule I: `	Your Inc	ome								12/15
	<u> </u>	e Employment	On the top of any additi	Debtor 1	our name	and			ŕ	Ing spouse	question
	If you have more than one job,		■ Employed				☐ Emplo	yed			
	attach a separate information about employers.	page with	Employment status	☐ Not employed			[	☐ Not en	nployed		
			Occupation								
	Include part-time, self-employed wo		Employer's name	United Parcel S	Service I	nc					
	Occupation may in or homemaker, if		Employer's address	55 Glenlake Pa Atlanta, GA 303	-	E					
			How long employed t	here?							
Pai	rt 2: Give Det	tails About Mor	nthly Income								
	imate monthly inco		ate you file this form. If	you have nothing to r	report for	any	line, write \$	\$0 in the	space. Inc	clude your noi	n-filing
lf yo	ou or your non-filing e space, attach a se	spouse have mo	ore than one employer, co this form.	ombine the information	on for all e	mpl	oyers for th	at persor	n on the lii	nes below. If	you need
							For Debte	or 1		btor 2 or ng spouse	
2.			ry, and commissions (b calculate what the month		2.	\$	8,5	04.00	\$	N/A	
3.	Estimate and list	monthly overt	ime pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross	Income. Add lir	ne 2 + line 3.		4.	\$	8,504	1.00	\$	N/A	

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Deb	tor 1	Michael L Campbell	_	(	Case i	number (if known)	17-10	944		
						Debtor 1	non-	Debtor filing s	pouse	
	Cop	by line 4 here	4.		\$	8,504.00	\$		N/A	<u>\</u>
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a	a.	\$	3,444.27	\$		N/A	١
	5b.	Mandatory contributions for retirement plans	5b	ο.	\$	0.00	\$		N/A	<del>-</del>
	5c.	Voluntary contributions for retirement plans	50		\$	0.00	\$		N/A	_
	5d.	Required repayments of retirement fund loans	50		\$	0.00	\$		N/A	
	5e. 5f.	Insurance	5e 5f		\$_ \$	69.94	\$		N/A	
	51. 5g.	Domestic support obligations Union dues	5 <u>0</u>		\$ _	0.00 82.47	\$ 		N/A	
	5h.	Other deductions. Specify:	_	).+	<b>\$</b> -	0.00			N/A	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	— 6.		\$	3,596.68	\$		N/A	_
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	4,907.32	\$		N/A	<u> </u>
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a	a	\$	0.00	\$		N/A	
	8b.	Interest and dividends	8b		<b>\$</b> —	0.00	\$-		N/A	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	: 8c	<b>)</b> .	\$	0.00	\$		N/A	_
	8d.	Unemployment compensation	80	d.	\$	0.00	\$		N/A	_
	8e.	Social Security	86	€.	\$	0.00	\$		N/A	<u>\</u>
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	e 8f		\$	0.00	\$		N/A	
	8g.	Pension or retirement income	80	-	\$	0.00	\$		N/A	_
	8h.	Other monthly income. Specify: Prorated Tax Refund	8h	1.+	\$	191.92	+ \$		N/A	<u>\</u>
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	9	<u> </u>	191.92	\$		N/	Ά
10	Cal	culate monthly income. Add line 7 + line 9.	10.	\$		5,099.24 + \$		N/A	= \$	5,099.24
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	Ψ_		J,U33.24 + V		IN/A	- Ψ -	3,033.24
11.	State Included Other	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not cify:	depe			•	•	chedule 11.		0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The rest that amount on the Summary of Schedules and Statistical Summary of Certailies						12.	\$	5,099.24
13.	Do	you expect an increase or decrease within the year after you file this form	?					l	Comb month	ined Ily income
-		No.								
		Voc Evoloin:								Ī

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<b></b> :11	in this informa	tion to identify ye	21.15.00001			1			
FIII	in this informat	tion to identify yo	our case:						
Deb	tor 1	Michael L Ca	ampbell			Che	eck if this is:		
							An amended filing	•	
!	tor 2							owing postpetition chapte	r
(Spc	ouse, if filing)						rs expenses as c	of the following date:	
Unit	ed States Bankr	uptcy Court for the	: WESTE	RN DISTRICT OF PENN	SYLVANIA		MM / DD / YYYY		
Cas	e number 17	7-10944							
(If kı	nown)			'					
Of	fficial Fo	rm 106J							
Sc	chedule	J: Your	Exper	ises				1:	2/15
Be info	as complete a ormation. If m nber (if know	and accurate as ore space is ne n). Answer eve	possible. eded, atta ry question	If two married people a ch another sheet to this					
Par 1.	t 1: Descr Is this a join	ibe Your House	ehold						
١.	_								
	No. Go to		_						
		s Debtor 2 live	ın a separ	ate nousehold?					
	□ No								
	⊔ Ye	es. Debtor 2 mus	st file Offici	al Form 106J-2, <i>Expense</i>	s for Separate House	ehold of De	ebtor 2.		
2.	Do you have	e dependents?	■ No						
	Do not list De Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debto		Dependent's age	Does dependent live with you?	
	Do not state	the						□No	
	dependents	names.						_ 🛘 Yes	
								☐ No	
								_ Yes	
								□ No	
					-			_ PYes	
								□ No	
3.	Do your ove	enses include	_					_ Yes	
J.	expenses of	f people other to d your depende	han $_{m  au}$	No Yes					
Par	t 2: Estima	ate Your Ongoi	ng Monthl	y Expenses					
exp				uptcy filing date unless y y is filed. If this is a sup					
				government assistance luded it on Schedule I:			.,		
(Off	ficial Form 10	·61.)					Your ex	penses	
4.		or home owners		ses for your residence. r lot.	Include first mortgage	e 4.	\$	1,200.00	
		led in line 4:	-						
	4a Pool o	estate taxes				4a.	¢	0.00	
		estate taxes rty, homeowner's	s or renter	's insurance		4a. 4b.	· ———	0.00 70.00	
	•	•		pkeep expenses		4c.	·	50.24	
		owner's associat				4d.	·	0.00	
5.	Additional n	nortgage paym	ents for yo	our residence, such as ho	ome equity loans	5.	\$	0.00	

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Deb	otor 1	Michael	L Campbell	Case n	umber (if known)	17-10944
6.	Utiliti	ies.				
0.	6a.		, heat, natural gas	6	Sa. \$	390.00
	6b.		wer, garbage collection		Sb. \$	0.00
	6c.		e, cell phone, Internet, satellite, and cable services		Sc. \$	355.00
	6d.	Other. Spe			3d. \$	0.00
7.			ekeeping supplies		7. \$	345.00
8.			children's education costs		8. \$	0.00
9.			ry, and dry cleaning		9. \$	100.00
			products and services		0. \$	90.00
			ntal expenses		1. \$	295.00
			Include gas, maintenance, bus or train fare.			233.00
			ar payments.	1	2. \$	433.00
13.			clubs, recreation, newspapers, magazines, and I	oooks 1	3. \$	190.00
14.	Char	itable cont	ributions and religious donations	1	4. \$	80.00
15.	Insur	rance.				
			nsurance deducted from your pay or included in lines	4 or 20.		
	15a.	Life insura	ance		5a. \$	0.00
	15b.	Health ins	urance	15	5b. \$	0.00
	15c.	Vehicle ins	surance	15	5c. \$	105.00
	15d.	Other insu	ırance. Specify:	15	5d. \$	0.00
16.			clude taxes deducted from your pay or included in li			
	Spec	,		1	6. \$	0.00
17.			ease payments:		- ^	
			ents for Vehicle 1		′a. \$	0.00
			ents for Vehicle 2		7b. \$	0.00
		Other. Spe			7c. \$	0.00
		Other. Spe			'd. \$	0.00
18.			of alimony, maintenance, and support that you o		8. \$	400.00
10			your pay on line 5, <i>Schedule I, Your Income</i> (Offi s you make to support others who do not live wit	ciai i oi iii iooij.	ν. φ	0.00
13.	Spec		s you make to support others who do not live wh	•	Ψ  9.	0.00
20		·	erty expenses not included in lines 4 or 5 of this			
20.			s on other property		a. \$	0.00
		Real estat			)b. \$	0.00
			homeowner's, or renter's insurance		Oc. \$	0.00
			nce, repair, and upkeep expenses		od. \$	0.00
			er's association or condominium dues		)e. \$	0.00
21		r: Specify:	or 3 association or condominant dues		21. +\$	0.00
۷١.	Otile	a. Specify.			-1. +ψ	0.00
22.	Calcu	ulate your ı	monthly expenses			
	22a.	Add lines 4	through 21.		\$	4,103.24
	22b.	Copy line 22	2 (monthly expenses for Debtor 2), if any, from Offic	ial Form 106J-2	\$	
	22c. /	Add line 22a	a and 22b. The result is your monthly expenses.		\$	4,103.24
						1,100121
23.		-	monthly net income.			
			12 (your combined monthly income) from Schedule		Ba. \$	5,099.24
	23b.	Copy your	monthly expenses from line 22c above.	23	Bb\$	4,103.24
	22.5	Cubtro at	our monthly expanses from your monthly in			
	23C.		our monthly expenses from your monthly income. is your <i>monthly net income</i> .	23	3c. \$	996.00
		THE TESUIL	is your monuny neumounte.			
24.	Do vo	ou expect a	an increase or decrease in your expenses within	the year after you file t	his form?	
	For ex	xample, do yo	ou expect to finish paying for your car loan within the year or			ease or decrease because of a
			terms of your mortgage?			
	■ No	0.				
	□Ye	es.	Explain here:			

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Fill in this info	ormation to identify your	case:				
Debtor 1	Michael L Campb	ell				
	First Name	Middle Name	Last N	lame		
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last N	lame		
United States E	Bankruptcy Court for the:	WESTERN DISTRICT O	OF PENNSYL	VANIA		
Case number	17-10944					
(if known)					☐ Check if this is an amended filing	I
ou must file to		le bankruptcy schedules n connection with a bank	or amended	schedules. Making a fa	lse statement, concealing property \$250,000, or imprisonment for up t	
Si	gn Below					
Did you բ	pay or agree to pay some	one who is NOT an attor	ney to help y	ou fill out bankruptcy fo	rms?	
■ No						
☐ Yes.	Name of person				ach Bankruptcy Petition Preparer's No claration, and Signature (Official Form	
	nalty of perjury, I declare are true and correct.	that I have read the sum	mary and scl	nedules filed with this de	eclaration and	
X /s/ Mi	ichael L Campbell		Х			
Mich	ael L Campbell ture of Debtor 1			Signature of Debtor 2		
Date	October 2, 2017		[	Date		

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	rmation to identify you							
Debtor 1	Michael L Camp	Middle Name	Last Name					
Debtor 2								
(Spouse if, filing)	First Name	Middle Name	Last Name					
United States B	ankruptcy Court for the:	WESTERN DISTRICT OF	PENNSYLVANIA					
Case number	17-10944							
(if known)				_	Check if this is an			
				a	mended filing			
O#:-:-! F.	107							
Official Fo		Affairs for Individ	luals Filing for B	ankruntev	4/16			
				equally responsible for sup				
information. If	more space is needed,	attach a separate sheet to		y additional pages, write you				
number (if knov	vn). Answer every que	stion.						
Part 1: Give	Details About Your Ma	rital Status and Where You	Lived Before					
1. What is yo	ur current marital statu	ıs?						
☐ Marrie	d							
■ Not ma	arried							
2. During the	last 3 years, have you	lived anywhere other than v	where you live now?					
_	nace of your o, mare you							
□ No ■ Ves I	ist all of the places you l	ived in the last 3 years. Do no	ot include where you live now	ı				
■ 1es. L	Yes. List all of the places you lived in the last 3 years. Do not include where you live now.							
Debtor 1 F	Prior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ac	Idress:	Dates Debtor 2 lived there			
	baugh Avenue	From-To:	☐ Same as Debtor	1	☐ Same as Debtor 1			
Sharon, I	PA 16146	2012 - May 20 <sup>-</sup>	17		From-To:			
states and territo	ories include Arizona, Ca		vada, New Mexico, Puerto R	nity property state or territor ico, Texas, Washington and W				
Dort 2 Eval	ain the Caurese of Var	w la como						
Part 2 Expla	ain the Sources of You	i ilicollic						
Fill in the to	tal amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part		ndar years?			
□ No								
_	ill in the details.							
		Debtor 1		Debtor 2				
		Sources of income	Gross income	Sources of income	Gross income			
		Check all that apply.	(before deductions and	Check all that apply.	(before deductions			
			exclusions)	_	and exclusions)			
	1 of current year until led for bankruptcy:	■ Wages, commissions, bonuses, tips	\$72,144.26	☐ Wages, commissions, bonuses, tips				
		☐ Operating a business		☐ Operating a business				

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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Debtor 1 Michael L Campbell

Debtor				Debtor 2				
				of income that apply.	Gross income (before deductions and exclusions)	Sources of inc		Gross income (before deductions and exclusions)
	or last caler anuary 1 to	ndar year: December 31, 20	■ Wage bonuses.	s, commissions, tips	\$106,781.03	☐ Wages, con bonuses, tips	ımissions,	
			☐ Opera	iting a business		☐ Operating a	business	
		dar year before th December 31, 20		s, commissions, tips	\$108,080.00	☐ Wages, con bonuses, tips	ımissions,	
			☐ Opera	iting a business		☐ Operating a	business	
<ul> <li>Did you receive any other income during loculate income regardless of whether that and other public benefit payments; pension winnings. If you are filing a joint case and the gross income from the local payments.</li> <li>No</li> <li>Yes. Fill in the details.</li> </ul>			f whether that incoments; pensions; point case and you	ome is taxable. Exame is taxable, exame income; inter that y	amples of other income are rest; dividends; money colle you received together, list it	alimony; child supp cted from lawsuits; only once under D	royalties; and ebtor 1.	
			Debtor 1			Debtor 2		
				of income below.	Gross income from each source (before deductions and exclusions)	Sources of inc Describe below		Gross income (before deductions and exclusions)
Pa	rt 3: Lis	t Certain Payment	ts You Made Bef	ore You Filed for	Bankruptcy			
6.	Are eithe □ No.	individual primari	I nor Debtor 2 has ly for a personal,	s primarily consu family, or househo	umer debts. Consumer deb ld purpose."			1(8) as "incurred by an
			ys before you filed	d for bankruptcy, di	d you pay any creditor a tot	al of \$6,425* or mo	re?	
		_	o line 7.					
		paid not ir	that creditor. Do include payments	not include paymer to an attorney for t	id a total of \$6,425* or more nts for domestic support obl his bankruptcy case. s after that for cases filed o	igations, such as cl	hild support a	ind alimony. Also, do
	Yes.	Debtor 1 or Deb			umer debts. id you pay any creditor a tot	al of \$600 or more	?	
		□ No. Go to	o line 7.					
		inclu		lomestic support o	id a total of \$600 or more ar bligations, such as child sup		, ,	
	Creditor	Creditor's Name and Address		Dates of payme	ent Total amount	Amount you still owe	Was this p	payment for
	249 5th Suite 30	ankruptcy Avenue		May 2017 June 2017 July 2017	\$1,179.00	\$35,750.00	■ Mortgag □ Car □ Credit 0 □ Loan Re	Card

Pittsburgh, PA 15222

☐ Suppliers or vendors

☐ Other\_\_

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Case number (if known) 17-10944 Debtor 1 Michael L Campbell

Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for
Bessemer System Federal Credit Union 106 Woodfield Drive Greenville, PA 16125	May 2017 June 2017 July 2017	\$1,785.00	\$34,516.00	<ul> <li>☐ Mortgage</li> <li>☐ Car</li> <li>☐ Credit Card</li> <li>☐ Loan Repayment</li> <li>☐ Suppliers or vendors</li> <li>☐ Other</li> </ul>
Syncb / Polaris Consumer Attn: Bankruptcy Po Box 965060 Orlando, FL 32896	May 2017 June 2017 July 2017	\$1,008.00	\$18,035.00	☐ Mortgage ☐ Car ☐ Credit Card ■ Loan Repayment ☐ Suppliers or vendors ☐ Other
Huntington National Bank Attn: Bankruptcy Po Box 340996 Columbus, OH 43234	May 2017 June 2017 July 2017	\$864.00	\$16,841.00	<ul> <li>☐ Mortgage</li> <li>☐ Car</li> <li>☐ Credit Card</li> <li>☐ Loan Repayment</li> <li>☐ Suppliers or vendors</li> <li>☐ Other</li> </ul>
Lending Club Corporation 71 Stevenson Street Suite 300 San Francisco, CA 94105	May 2017 June 2017 July 2017	\$2,514.00	\$28,567.00	<ul> <li>☐ Mortgage</li> <li>☐ Car</li> <li>☐ Credit Card</li> <li>☐ Loan Repayment</li> <li>☐ Suppliers or vendors</li> <li>☐ Other</li> </ul>
Onemain Financial Po Box 1010 Evansville, IN 47706	April 2017 May 2017 June 2017	\$846.00	\$14,105.00	☐ Mortgage ☐ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other
Synchrony Bank / Sams Club Attn: Bankruptcy Po Box 965060 Orlando, FL 32896	April 2017 May 2017 June 2017	\$828.00	\$7,906.00	☐ Mortgage ☐ Car ■ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other
First National Bank Of Pa 1 Fnb Boulevard Hermitage, PA 16148	May 2017 June 2017 July 2017	\$471.00	\$5,898.00	☐ Mortgage ☐ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other

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	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for		
	Dell Financial Services Attn: Bankruptcy	May 2017 June 2017	\$93.00	\$909.00	☐ Mortgage ☐ Car		
	Po Box 81577	July 2017			■ Credit Card		
	Austin, TX 78708				☐ Loan Repayment		
					☐ Suppliers or vendors		
					☐ Other		
	Citibank / The Home Depot	June 2017	\$75.00	\$736.00	☐ Mortgage		
	Centralized Bankruptcy	July 2017			☐ Car		
	Po Box 790040	August 2017			■ Credit Card		
	S Louis, MO 63129				☐ Loan Repayment		
					☐ Suppliers or vendors		
					Other		
	Kohls / Capital One	May 2017	\$81.00	\$221.00	☐ Mortgage		
	Kohls Credit	June 2017			☐ Car		
	Po Box 3043	July 2017			■ Credit Card		
	Milwaukee, WI 53201				☐ Loan Repayment		
					☐ Suppliers or vendors		
					☐ Other		
	a business you operate as a sole proprietor. 1 alimony.  No	1 U.S.C. § 101. Include pa	yments for domestic	support obligation	s, such as child support and		
	☐ Yes. List all payments to an insider.						
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment		
8.	Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider.						
	<ul><li>No</li><li>☐ Yes. List all payments to an insider</li></ul>						
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name		
Par	t 4: Identify Legal Actions, Repossession	ns, and Foreclosures					
ı uı	lucinity Logal Actions, Repossession	ns, and i orcolosares					
9.	Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?  List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.						
	■ No □ Yes. Fill in the details.						
		Natura 64	0		Otation of the		
	Case title Case number	Nature of the case	Court or agency		Status of the case		

7.

8.

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Debtor 1 Michael L Campbell

10.	Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below.						
	□ No. Go to line 11.						
	Yes. Fill in the information below.						
	Creditor Name and Address	Describe the Property	Date	Value of the property			
		Explain what happened		p p			
	Citizens Bank Attention: ROP-15B 1 Citizens Drive Riverside, RI 02940	2014 Chevrolet Silverado 2500  ■ Property was repossessed. □ Property was foreclosed. □ Property was garnished.	July 2017	\$35,000.00			
		☐ Property was attached, seized or levied.					
11.	within 90 days before you filed for bankri accounts or refuse to make a payment be  No Yes. Fill in the details.  Creditor Name and Address	uptcy, did any creditor, including a bank or financial insecause you owed a debt?  Describe the action the creditor took	Date action was taken	Amounts from your			
<b>Par</b> 13.		s uptcy, did you give any gifts with a total value of more t	han \$600 per person  Dates you gave the gifts	? Value			
	Person to Whom You Gave the Gift and Address:						
14.	Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?  ■ No □ Yes. Fill in the details for each gift or contribution.						
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)		Dates you contributed	Value			
Par	t 6: List Certain Losses						
15.	or gambling?  No						
	Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending	Date of your loss	Value of property lost			
		insurance claims on line 33 of Schedule A/B: Property.					

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Debtor 1 Michael L Campbell

Par	t 7: List Certain Payments or Transfers						
16.	16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.						
	□ No						
	Yes. Fill in the details.						
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any property transferred		Date payment or transfer was made	Amount of payment		
	Foster Law Offices PO Box 966 Meadville, PA 16335 dan@mrdebtbuster.com	Expenses - \$500.00 Legal Fee Retainer - \$500.00		August 18, 2017	\$1,000.00		
17.	Within 1 year before you filed for bankruptcy, di promised to help you deal with your creditors o Do not include any payment or transfer that you list	r to make payments to your creditors?		r transfer any proper	ty to anyone who		
	■ No						
	☐ Yes. Fill in the details.						
	Person Who Was Paid Address	Description and value of any property transferred		Date payment or transfer was made	Amount of payment		
18.	Ithin 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property ansferred in the ordinary course of your business or financial affairs?  Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not clude gifts and transfers that you have already listed on this statement.  Include Security interest or mortgage on your property). The statement is the security interest or mortgage on your property.  Include Security interest or mortgage on your property.  Include Security interest or mortgage on your property.  Include Security interest or mortgage on your property.						
	☐ Yes. Fill in the details.  Person Who Received Transfer  Address	property transferred payr		nny property or received or debts change	Date transfer was made		
	Person's relationship to you						
19.	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)  No						
	☐ Yes. Fill in the details.						
	Name of trust	Description and value of the property transferred			Date Transfer was made		
Par	t 8: List of Certain Financial Accounts, Instrur	ments, Safe Deposit Boxes, and Stora	ge Units				
20.	Within 1 year before you filed for bankruptcy, w sold, moved, or transferred? Include checking, savings, money market, or other.	·			, ,		
	houses pension funds cooperatives association		asposit, sile	ares iii variks, creuit	umons, brokeraye		

☐ No

Yes. Fill in the details.

Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)

Last 4 digits of account number Type of account or instrument

Date account was closed, sold, moved, or transferred

Last balance before closing or transfer

Filed 10/02/17 Entered 10/02/17 14:14:16 Desc Main Case 17-10944-TPA Doc 12 Page 34 of 54 Document Case number (if known) 17-10944 Debtor 1 Michael L Campbell Name of Financial Institution and Last 4 digits of Type of account or Date account was Last balance Address (Number, Street, City, State and ZIP account number instrument closed, sold, before closing or Code) moved, or transfer transferred **PNC Bank XXXX-0036** July 20, 2017 \$170.00 Checking Attn: Bankruptcy □ Savings 2730 Liberty Avenue ☐ Money Market Pittsburgh, PA 15222 □ Brokerage □ Other 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Name of Financial Institution Describe the contents Who else had access to it? Do you still Address (Number, Street, City, Address (Number, Street, City, State and ZIP Code) have it? State and ZIP Code) 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? No Yes. Fill in the details. Do you still Name of Storage Facility Who else has or had access Describe the contents Address (Number, Street, City, State and ZIP Code) have it? to it? Address (Number, Street, City, State and ZIP Code) Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. No Yes. Fill in the details. Value Owner's Name Where is the property? Describe the property (Number, Street, City, State and ZIP Address (Number, Street, City, State and ZIP Code) Code) Part 10: Give Details About Environmental Information For the purpose of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

Address (Number, Street, City, State and

Governmental unit

ZIP Code)

Address (Number, Street, City, State and ZIP Code)

☐ Yes. Fill in the details.

Name of site

Date of notice

Environmental law, if you

know it

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> \_. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). Statement of Financial Affairs for Individuals Filing for Bankruptcy

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■ No

☐ Yes. Name of Person

Official Form 107

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

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Fill in this inform	nation to identify your case:
Debtor 1	Michael L Campbell
Debtor 2 (Spouse, if filing)	
United States B	Bankruptcy Court for the: Western District of Pennsylvania
Case number (if known)	17-10944

Check as directed in lines 17 and 21:						
According to the calculations required by this Statement:						
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).					
	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).					
	3. The commitment period is 3 years.					
	4. The commitment period is 5 years.					
☐ Check if this is an amended filing						

### Official Form 122C-1

## Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

I	Part	1: Calculate Your Average Monthly Income							
Ī	1.	What is your marital and filing status? Check one of	nly.						
		■ Not married. Fill out Column A, lines 2-11.							
		☐ Married. Fill out both Columns A and B, lines 2-11.							
	10 th	Il in the average monthly income that you received from al 11(10A). For example, if you are filing on September 15, the 6- e 6 months, add the income for all 6 months and divide the tota ouses own the same rental property, put the income from that	month per al by 6. Fi	riod would Il in the re	be March 1 throusult. Do not includ	igh Aug le any i	gust 31. If the amount m	ount of your monthly incomore than once. For examp	ne varied during le, if both
						Colur Debto		Column B Debtor 2 or non-filing spouse	
	2.	Your gross wages, salary, tips, bonuses, overtime payroll deductions).	, and co	mmissio	ons (before all	\$	8,320.85	\$	
	3.	<b>Alimony and maintenance payments.</b> Do not include Column B is filled in.	e payme	nts from	a spouse if	\$	0.00	\$	
	4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.					\$	0.00	\$	
	5.	Net income from operating a business, profession, or farm	Debtor	1					
		Gross receipts (before all deductions)	\$	0.00					
		Ordinary and necessary operating expenses	<b>-</b> \$ _	0.00					
		Net monthly income from a business, profession, or fa	rm \$ _	0.00	Copy here ->	\$	0.00	\$	
	6.	Net income from rental and other real property	Debtor						
		Gross receipts (before all deductions)	\$	0.00					
		Ordinary and necessary operating expenses	<b>-</b> \$ _	0.00					
1		Net monthly income from rental or other real property	\$	0.00	Copy here ->	\$	0.00	\$	

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

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Michael L Campbell Debtor 1 Case number (if known) Column B Column A Debtor 1 Debtor 2 or non-filing spouse 0.00 7. Interest, dividends, and royalties 8. Unemployment compensation 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you For your spouse 9. Pension or retirement income. Do not include any amount received that was a 0.00 benefit under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. 0.00 Total amounts from separate pages, if any. \$ 0.00 11. Calculate your total average monthly income. Add lines 2 through 10 for 8,320.85 8.320.85 each column. Then add the total for Column A to the total for Column B. Total average monthly income Part 2: **Determine How to Measure Your Deductions from Income** 12. Copy your total average monthly income from line 11. 8,320.85 13. Calculate the marital adjustment. Check one: You are not married. Fill in 0 below. You are married and your spouse is filing with you. Fill in 0 below. ☐ You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below. Total 0.00 0.00 Copy here=> 8,320.85 14. Your current monthly income. Subtract line 13 from line 12. 15. Calculate your current monthly income for the year. Follow these steps: 8,320.85 15a. Copy line 14 here=> Multiply line 15a by 12 (the number of months in a year). **x** 12 99,850.20 15b. The result is your current monthly income for the year for this part of the form.

Case 17-10944-TPA Doc 12 Filed 10/02/17 Entered 10/02/17 14:14:16 Desc Main Page 39 of 54 Document Debtor 1 Michael L Campbell Case number (if known) 17-10944 16. Calculate the median family income that applies to you. Follow these steps: 16a. Fill in the state in which you live. PA 16b. Fill in the number of people in your household. 1 51,138.00 16c. Fill in the median family income for your state and size of household. \$ To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 17. How do the lines compare? Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, Disposable income is not determined under 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Your Disposable Income (Official Form 122C-2). Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, Disposable income is determined under 11 U.S.C. § 17b. 1325(b)(3). Go to Part 3 and fill out Calculation of Your Disposable Income (Official Form 122C-2). On line 39 of that form, copy your current monthly income from line 14 above. Calculate Your Commitment Period Under 11 U.S.C. § 1325(b)(4) Part 3: 18. Copy your total average monthly income from line 11. 8,320.85 19. Deduct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13. 0.00 19a. If the marital adjustment does not apply, fill in 0 on line 19a. 8,320.85 19b. Subtract line 19a from line 18. \$ 20. Calculate your current monthly income for the year. Follow these steps: 8,320.85 20a. Copy line 19b Multiply by 12 (the number of months in a year). x 12 \$ 99,850.20 20b. The result is your current monthly income for the year for this part of the form 51,138.00 \$ 20c. Copy the median family income for your state and size of household from line 16c 21. How do the lines compare? Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, *The commitment* period is 3 years. Go to Part 4. Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, The commitment period is 5 years. Go to Part 4.

#### Part 4: Sign Below

By signing here, under penalty of perjury I declare that the information on this statement and in any attachments is true and correct.

### X /s/ Michael L Campbell

### Michael L Campbell

Signature of Debtor 1

### Date October 2, 2017

MM / DD / YYYY

If you checked 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

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					_			
Fill in this	information to id	dentify your cas	e:					
Debtor 1	Michael L	Campbell						
Debtor 2								
(Spouse, if	filing)							
United Sta	tes Bankruptcy Co	ourt for the: We	stern District of P	Pennsylvania				
Case numb (if known)	per <u>17-10944</u>					☐ Check if th	is is an amende	d filing
Official For	m 122C-2							
Chapt	er 13 Calc	culation o	f Your Di	sposable l	ncome			04/16
	his form, you wil ent Period (Officia		pleted copy of (	Chapter 13 Staten	nent of Your Current	Monthly Inco	me and Calculation	on of
space is ne		eparate sheet to	this form, Inclu	de the line numbe	ether, both are equa er to which additiona			
Part 1:	Calculate Your	Deductions from	n Your Income					
the que		15. To find the II	RS standards, g	o online using the	for certain expense a link specified in the			
expense	s if they are highe	er than the standa	ırds. Do not inclu	de any operating e	pense. In later parts of expenses that you subfiction in the subfiction of the subfi	tracted from inc	come in lines 5 and	
If your e	xpenses differ fro	m month to montl	n, enter the avera	age expense.				
Note: Li	ne numbers 1-4 a	re not used in this	form. These nur	mbers apply to info	rmation required by a	similar form us	ed in chapter 7 ca	ses.
5. <b>Th</b>	e number of peo	ple used in dete	mining your de	ductions from inc	ome			
plu		ny additional dep	endents whom yo		federal income tax rei mber may be differen		1	
Nationa	l Standards	You must us	e the IRS Nation	al Standards to ans	swer the questions in	lines 6-7.		
	od, clothing, and indards, fill in the				ed in line 5 and the IR	S National	\$	639.00
the peo	dollar amount for ople who are 65 or	out-of-pocket he	alth care. The nu older people have	mber of people is s	entered in line 5 and the plit into two categorie wance for health car ce 22.	speople who	are under 65 and	

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Michael L Campbell 17-10944 Debtor 1 Case number (if known) People who are under 65 years of age 7a. Out-of-pocket health care allowance per person 49 7b. Number of people who are under 65 1 7c. Subtotal. Multiply line 7a by line 7b. 49.00 Copy here=> \$ 49.00 People who are 65 years of age or older 7d. Out-of-pocket health care allowance per person 117 7e. Number of people who are 65 or older 0 7f. Subtotal. Multiply line 7d by line 7e. 0.00 Copy here=> 0.00 7g. Total. Add line 7c and line 7f 49.00 Copy total here=> \$ 49.00 Local Standards You must use the IRS Local Standards to answer the questions in lines 8-15. Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts: Housing and utilities - Insurance and operating expenses Housing and utilities - Mortgage or rent expenses To answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office. Housing and utilities - Insurance and operating expenses: Using the number of people you entered in line 5, fill 470.00 in the dollar amount listed for your county for insurance and operating expenses. Housing and utilities - Mortgage or rent expenses: 9a. Using the number of people you entered in line 5, fill in the dollar amount 645.00 listed for your county for mortgage or rent expenses. 9b. Total average monthly payment for all mortgages and other debts secured by your home. To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Next divide by 60. Name of the creditor Average monthly payment -NONE-\$ Сору Repeat this amount 0.00 0.00 9b. Total average monthly payment \$ here=> on line 33a. 9c. Net mortgage or rent expense. Subtract line 9b (total average monthly payment) from line 9a (mortgage Copy 645.00 645.00 or rent expense). If this number is less than \$0, enter \$0. here=> 10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and 0.00 affects the calculation of your monthly expenses, fill in any additional amount you claim.

Explain why:

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Michael L Campbell 17-10944 Debtor 1 Case number (if known) 11. Local transportation expenses: Check the number of vehicles for which you claim an ownership or operating expense. ☐ 0. Go to line 14. 1. Go to line 12.  $\square$  2 or more. Go to line 12 12. Vehicle operation expense: Using the IRS Local Standards and the number of vehicles for which you claim the 250.00 operating expenses, fill in the Operating Costs that apply for your Census region or metropolitan statistical area. 13. Vehicle ownership or lease expense: Using the IRS Local Standards, calculate the net ownership or lease expense for each vehicle below. You may not claim the expense if you do not make any loan or lease payments on the vehicle. In addition, you may not claim the expense for more than two vehicles. Vehicle 1 **Describe Vehicle 1:** 2016 Jeep Cherokee Sport 24,000 miles 13a. Ownership or leasing costs using IRS Local Standard..... 485.00 13b. Average monthly payment for all debts secured by Vehicle 1. Do not include costs for leased vehicles. To calculate the average monthly payment here and on line 13e, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60. Name of each creditor for Vehicle 1 Average monthly payment **Bessemer System Federal Credit Union** 624.05 Repeat this Copy amount on **Total Average Monthly Payment** 624.05 624.05 line 33b. 13c. Net Vehicle 1 ownership or lease expense Copy net Vehicle 1 Subtract line 13b from line 13a. if this number is less than \$0, enter \$0. ..... expense here 0.00 0.00 Vehicle 2 Describe Vehicle 2: 13d. Ownership or leasing costs using IRS Local Standard..... 0.00 13e. Average monthly payment for all debts secured by Vehicle 2. Do not include costs for leased vehicles. Name of each creditor for Vehicle 2 Average monthly payment Сору Repeat this here amount on line Total average monthly payment 0.00 13f. Net Vehicle 2 ownership or lease expense Copy net Vehicle 2 Subtract line 13e from line 13d. if this number is less than \$0, enter \$0. ..... expense here 0.00 0.00 14. Public transportation expense: If you claimed 0 vehicles in line 11, using the IRS Local Standards, fill in the 0.00 Public Transportation expense allowance regardless of whether you use public transportation. 15. Additional public transportation expense: If you claimed 1 or more vehicles in line 11 and if you claim that you may also deduct a public transportation expense, you may fill in what you believe is the appropriate expense, but you may 0.00 not claim more than the IRS Local Standard for Public Transportation.

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Debtor 1 Michael L Campbell Case number (if known) 17-10944

	er Necessary Expenses	In addition to the expense the following IRS categories		, you are allowed your monthly expenses	for	
16.	self-employment taxes, soc	d local taxes, such as income taxes, clude the monthly amount withheld from lust divide the expected refund by 12 for taxes.	\$	3,444.27		
17.	Involuntary deductions: To contributions, union dues, a		ductions that your job re-	quires, such as retirement		
			ob, such as voluntary 40	11(k) contributions or payroll savings.	\$	82.47
18.	filing together, include payr	ments that you make for you or life insurance on your dep	ur spouse's term life insu	e insurance. If two married people are trance. I spouse's life insurance, or for any form	\$	0.00
19.	Court-ordered payments: administrative agency, such Do not include payments or	n as spousal or child suppo	ort payments.	by the order of a court or  You will list these obligations in line 35.	\$	400.00
20.	Education: The total month					
	as a condition for your jo	ob, or				
	for your physically or me	\$	0.00			
21.	Childcare: The total month Do not include payments for	\$	0.00			
22.	22. Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7.					
	Payments for health insura				\$	246.00
23.	23. Optional telephone and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer. Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 122C-1, or any amount you previously deducted.					
	Add all of the assessment	llowed under the IPS exp	ense allowances.			
24.	Add lines 6 through 23	nowed under the INS exp			\$	6,580.74
	Add lines 6 through 23.  itional Expense Deduction	These are additional	deductions allowed by the any expense allowances		\$	6,580.74
Add	Add lines 6 through 23.  itional Expense Deduction  Health insurance, disabili	These are additional Note: Do not include ity insurance, and health s	deductions allowed by the any expense allowances savings account expen		·	6,580.74
Add	Add lines 6 through 23.  itional Expense Deduction  Health insurance, disabilitinsurance, disability insurance	These are additional Note: Do not include ity insurance, and health s	deductions allowed by the any expense allowances savings account expen	s listed in lines 6-24.  ses. The monthly expenses for health	·	6,580.74
Add	Add lines 6 through 23. litional Expense Deduction  Health insurance, disabilitinsurance, disability insurary your dependents.	These are additional Note: Do not include ity insurance, and health s	deductions allowed by the any expense allowances savings account expense counts that are reasonab	s listed in lines 6-24.  ses. The monthly expenses for health	·	6,580.74
Add	Add lines 6 through 23.  itional Expense Deduction  Health insurance, disability insurance, disability insurance, your dependents.  Health insurance	These are additional Note: Do not include ity insurance, and health s	deductions allowed by the any expense allowances savings account expense counts that are reasonab  \$ 69.94	s listed in lines 6-24.  ses. The monthly expenses for health	·	6,580.74
Add	Add lines 6 through 23.  litional Expense Deduction  Health insurance, disability insurance, disability insurary your dependents.  Health insurance  Disability insurance	These are additional Note: Do not include ity insurance, and health s	deductions allowed by the any expense allowances savings account expense counts that are reasonab  \$ 69.94   \$ 0.00	s listed in lines 6-24.  ses. The monthly expenses for health	·	69.94
Add	Add lines 6 through 23.  litional Expense Deduction  Health insurance, disability insurance, disability insurary your dependents.  Health insurance  Disability insurance  Health savings account	These are additional Note: Do not include ity insurance, and health since, and health savings according total amount?	deductions allowed by the any expense allowances savings account expense ounts that are reasonab  \$ 69.94 \$ 0.00 + \$ 0.00	s listed in lines 6-24.  ISES. The monthly expenses for health ly necessary for yourself, your spouse, o	r	
Add	Add lines 6 through 23.  Itional Expense Deduction  Health insurance, disability insurance, disability insurance your dependents.  Health insurance  Disability insurance  Health savings account  Total  Do you actually spend this	These are additional Note: Do not include ity insurance, and health since, and health savings according total amount?	deductions allowed by the any expense allowances savings account expense ounts that are reasonab  \$ 69.94 \$ 0.00 + \$ 0.00	s listed in lines 6-24.  ISES. The monthly expenses for health ly necessary for yourself, your spouse, o	r	
<b>Add</b> 25.	Add lines 6 through 23.  litional Expense Deduction  Health insurance, disability insurance, disability insurance your dependents.  Health insurance  Disability insurance  Health savings account  Total  Do you actually spend this  No. How much do your yes  Continued contributions continue to pay for the reas	These are additional Note: Do not include ity insurance, and health since, and health savings according total amount? You actually spend?  to the care of household conable and necessary care of your immediate family were	deductions allowed by the any expense allowances savings account expense allowances savings account expense accounts that are reasonables \$ 69.94 \$ 0.00 \$ 69.94 \$ 0.00 \$ 69.94 \$ 0.00 \$ 69.94	c actual monthly expenses that you will rly, chronically ill, or disabled member of such expenses. These expenses may	r	
25. 26.	Add lines 6 through 23.  itional Expense Deduction  Health insurance, disability insurance, disability insurance your dependents.  Health insurance  Disability insurance  Health savings account  Total  Do you actually spend this  No. How much do your yes  Continued contributions continue to pay for the reasyour household or member include contributions to an approtection against family	These are additional Note: Do not include ity insurance, and health since, and health since, and health savings account of the care of household conable and necessary care of your immediate family waccount of a qualified ABLE violence. The reasonably in the include it is not included in the care and included in the care of household conable and necessary care of your immediate family waccount of a qualified ABLE violence. The reasonably in the care and included in th	deductions allowed by the any expense allowances savings account expense counts that are reasonables and the same savings account expense and support of an elder who is unable to pay for seprogram. 26 U.S.C. § 5 necessary monthly expe	c actual monthly expenses that you will rly, chronically ill, or disabled member of such expenses. These expenses may	r\$	69.94

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ebtor 1	Michael L Campbell		Case number (if kn	own)	17-1	0944			
	Additional home energy costs. Your hom line 8.	e energy costs are included in your insura	ance and operat	ting (	expense	es on			
	If you believe that you have home energy c 8, then fill in the excess amount of home er		costs included i	n ex	penses	on lin	е		
	You must give your case trustee document amount claimed is reasonable and necessary		ust show that th	e ad	ditional			\$	0.00
	Education expenses for dependent child \$160.42* per child) that you pay for your depublic elementary or secondary school.	Iren who are younger than 18. The mont pendent children who are younger than 18	thly expenses ( 8 years old to a	not r ttend	nore tha	an ate or			
	You must give your case trustee document claimed is reasonable and necessary and r		ıst explain why	the a	amount				
	* Subject to adjustment on 4/01/19, and eve	ery 3 years after that for cases begun on o	r after the date	of a	djustme	nt.		\$	0.00
	Additional food and clothing expense. The monthly amount by which your actual food and clothing expenses are higher than the combined food and clothing allowances in the IRS National Standards. That amount cannot be more than 5% of the food and clothing allowances in the IRS National Standards.								
	To find a chart showing the maximum addit instructions for this form. This chart may also			epa	rate				
	You must show that the additional amount claimed is reasonable and necessary.							\$	21.00
	Continuing charitable contributions. The instruments to a religious or charitable orga		te in the form of	cas	h or fina	ancial			
	Do not include any amount more than 15%	of your gross monthly income.						\$	100.00
	2. Add all of the additional expense deductions. Add lines 25 through 31.							i	190.94
Dedu	uctions for Debt Payment								
le	for debts that are secured by an interest pans, and other secured debt, fill in lines	33a through 33e.							
	o calculate the total average monthly paym reditor in the 60 months after you file for ba		due to each se	ecure	ea				
	Mortgages on your home							erage yment	monthly
33a.	Copy line 9b here					=>	\$	<b>,</b>	0.00
	Loans on your first two vehicles						-		
33b.	•					=>	\$		624.05
33c.	Canadina 40a hana					=>	\$		0.00
							Ψ-		0.00
33d. Nam	List other secured debts: e of each creditor for other secured debt	Identify property that secures the debt		incl	es paym ude tax	es			
					No				
	-NONE-				Yes		\$		
					No				
					Yes		\$		
		-			No		-		
					Yes	+	\$		
						7	 [		
	Total average monthly payment. Add lines	220 through 22d	\$	62	4.05	Copy total		\$	624.05

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Michael L Campbell 17-10944 Debtor 1 Case number (if known) 34. Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents? No. Go to line 35. ☐ Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the cure amount). Next, divide by 60 and fill in the information below. Name of the creditor Identify property that secures the debt Total cure amount Monthly cure amount  $\div 60 = \$$ -NONE-Сору total 0.00 0.00 Total here=> 35. Do you owe any priority claims - such as a priority tax, child support, or alimony - that are past due as of the filing date of your bankruptcy case? 11 U.S.C. § 507. ☐ No. Go to line 36. Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19. Total amount of all past-due priority claims 11,000.00 ÷60 \$ 183.33 36. Projected monthly Chapter 13 plan payment 975.00 Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alabama and North Carolina) or by 4.10 the Executive Office for United States Trustees (for all other districts). To find a list of district multipliers that includes your district, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. Copy total 39.98 39.98 here=> \$ Average monthly administrative expense 847.36 37. Add all of the deductions for debt payment. Add lines 33e through 36. **Total Deductions from Income** 38. Add all of the allowed deductions. Copy line 24, All of the expenses allowed under IRS 6,580.74 expense allowances Copy line 32, All of the additional expense deductions 190.94 Copy line 37, All of the deductions for debt payment 847.36 7,619.04 7.619.04 Total deductions..... Copy total here=>

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Debtor 1	Michael L	Cam	npbell			Ca	ase nu	imber (if known) 17	7-1094	14	
Part 2:	Determin	e You	ır Disposable Income Under 11	U.S.C. § 13	25(b	)(2)					
			rent monthly income from line Current Monthly Income and Ca				ı <b>.</b>		\$_		8,320.85
<b>ch</b> dis red	ildren. The nability paymeseived in acco	onth nts fo ordan	Iy necessary income you receily average of any child support professor a dependent child, reported in the with applicable nonbankruptcy anded for such child.	ayments, fos Part I of Forn	ter c n 12	are payments, or 2C-1, that you		\$0	0.00		
em in '	41. Fill in all qualified retirement deductions. The monthly total of all amounts that your employer withheld from wages as contributions for qualified retirement plans, as specified in 11 U.S.C. § 541(b)(7) plus all required repayments of loans from retirement plans, as specified in 11 U.S.C. § 362(b)(19).					d	\$	0.00			
42. <b>To</b>	tal of all ded	uctio	ns allowed under 11 U.S.C. § 7	07(b)(2)(A).	Copy	y line 38 here=	=>	\$ 7,619	.04		
exp the	penses and yeir expenses.	ou ha You r	al circumstances. If special circave no reasonable alternative, de must give your case trustee a defocumentation for the expenses.	scribe the sp	ecia	l circumstances a	nd				
Descri	be the spec	al cir	rcumstances			Amount of exp	ens	е			
					_	\$		_			
						\$		_			
						\$		_			
				Total	\$_	0.00		Copy ere=>\$	0	.00	
44. <b>To</b>	tal adjustme	nts. /	Add lines 40 through 43.			=>	\$_	7,619.04	Copy here=		7,619.04
45. <b>Ca</b> Part 3:	ī		thly disposable income under	§ 1325(b)(2).	. Sub	otract line 44 from	line	39.	\$	·	701.81
46. <b>Ch</b> have time	ange in incove changed on the your case of the ground t	me or are vill be	or expenses. If the income in For virtually certain to change after the open, fill in the information below, check 122C-1 in the first columnin when the increase occurred, a	he date you f w. For examp n, enter line :	iled ole, i 2 in t	your bankruptcy p f the wages report the second columi	etition ted in ex	on and during the ncreased after			
Form	Line		Reason for change			Date of change	е	Increase or decrease?	Amo	ount of change	•
☐ 1220 ☐ 1220 ☐ 1220 ☐ 1220 ☐ 1220 ☐ 1220 ☐ 1220	C-2 C-1 C-2 C-1 C-2 C-1							☐ Increase ☐ Decrease ☐ Increase ☐ Decrease ☐ Increase ☐ Increase ☐ Decrease ☐ Increase ☐ Decrease ☐ Decrease	\$ _ \$ _ \$ _		

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Debtor 1 Michael L Campbell Case number (if known) 17-10944

Part 4:	Sign Below
	-
	By signing here, under penalty of perjury you declare that the information on this statement and in any attachments is true and correct.
v	
Х	/s/ Michael L Campbell
Х	/s/ Michael L Campbell Michael L Campbell Signature of Debtor 1
	Michael L Campbell
	Michael L Campbell Signature of Debtor 1

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Debtor 1 Michael L Campbell Case number (if known) 17-10944

### **Current Monthly Income Details for the Debtor**

### **Debtor Income Details:**

Income for the Period 03/01/2017 to 08/31/2017.

### Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: United Parcel Service Inc

Income by Month:

6 Months Ago:	03/2017	\$8,024.58
5 Months Ago:	04/2017	\$8,276.56
4 Months Ago:	05/2017	\$7,579.69
3 Months Ago:	06/2017	\$7,751.16
2 Months Ago:	07/2017	\$9,108.95
Last Month:	08/2017	\$9,184.17
	Average per month:	\$8,320.85

## Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>#procedure.

### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-10944-TPA Doc 12 Filed 10/02/17 Entered 10/02/17 14:14:16 Desc Main Document Page 53 of 54

B2030 (Form 2030) (12/15)

### United States Bankruptcy Court Western District of Pennsylvania

In re	e Michael L Campbell		Case No.	17-10944	
		Debtor(s)	Chapter	13	
	DISCLOSURE OF COMPENS	SATION OF ATTO	RNEY FOR DE	EBTOR(S)	
	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b) compensation paid to me within one year before the filing of be rendered on behalf of the debtor(s) in contemplation of contemplation.	of the petition in bankruptcy.	, or agreed to be paid	to me, for services rendered or to	
	For legal services, I have agreed to accept		\$	4,000.00	
	Prior to the filing of this statement I have received		\$	500.00	
	Balance Due		<b>\$</b>	3,500.00	
2. ′	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed compens	sation with any other person	unless they are memb	pers and associates of my law firm.	
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the names				
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:				
1	<ul><li>a. Analysis of the debtor's financial situation, and renderin</li><li>b. Preparation and filing of any petition, schedules, statem</li><li>c. Representation of the debtor at the meeting of creditors</li><li>d. [Other provisions as needed]</li></ul>	ent of affairs and plan which	n may be required;		
,	Negotiations with secured creditors to red reaffirmation agreements and applications 522(f)(2)(A) for avoidance of liens on hous	as needed; preparation	emption planning; and filing of moti	preparation and filing of ons pursuant to 11 USC	
<b>6.</b>	By agreement with the debtor(s), the above-disclosed fee de Representation of the debtors in any disch any other adversary proceeding.			es, relief from stay actions or	
		CERTIFICATION			
	I certify that the foregoing is a complete statement of any a pankruptcy proceeding.	greement or arrangement for	r payment to me for re	epresentation of the debtor(s) in	
O	October 2, 2017	/s/ Daniel P. Fost	er		
D	Date	Daniel P. Foster Signature of Attorne			
		Foster Law Offic	-		
		PO Box 966 Meadville, PA 16	225		
		814.724.1165 Fa			
		dan@mrdebtbus	ter.com	_	
		Name of law firm			

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## United States Bankruptcy Court Western District of Pennsylvania

Dobton(s) Chanton 12	944
Debtor(s) Chapter 13_	

	VERIFICATION OF CREDITOR MATRIX		
The ab	ove-named Debtor hereby verifie	es that the attached list of creditors is true and correct to the best of his/her knowledge.	
Date:	October 2, 2017	/s/ Michael L Campbell	
		Michael L Campbell Signature of Debtor	
		Digitation Debion	